

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>imp</i>		7/1/00
O.I.P.E. CLASSIFIER		8	7-2800
FORMALITY REVIEW	RE	JC 816	08-31-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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